Learn, Experience, Advocate, Discover, Serve (LEADS)

Course Information Year 1

AY 2026-2027

MS 137

Boston University Chobanian & Avedisian School of Medicine

Contents

Medical Education Program Objectives

A Chobanian & Avedisian School of Medicine graduate will be able to:		
INSTITUTIONAL LEARNING OBJECTIVES	MEDICAL EDUCATION PROGRAM OBJECTIVES	
Establish and maintain medical knowledge necessary for the care of patients (MK)	MK.1	Demonstrate knowledge of basic, clinical, pathophysiologic, biopsychosocial, health systems sciences, and humanities, needed for clinical practice.
	MK.2	Apply foundational knowledge for clinical problem-solving, diagnostic reasoning, and decision-making to clinical scenarios.
	MK.3	Demonstrate knowledge of research design, interpretation, and application of research outcomes to clinical questions.
Demonstrate clinical skills and diagnostic reasoning needed for patient care (CSDR)	CSDR.1	Gather complete and hypothesis driven histories from patients, families, and electronic health records in an organized manner.
	CSDR.2	Conduct complete and hypothesis-driven physical exams interpreting abnormalities while maintaining patient comfort.
	CSDR.3	Develop and justify the differential diagnosis for clinical presentations by using disease and/or condition prevalence, pathophysiology, and pertinent positive and negative clinical findings.
	CSDR.4	Develop a management plan and provide an appropriate rationale.
	CSDR.5	Deliver an organized, clear, and focused oral presentation
	CSDR.6	Document patient encounters accurately, efficiently, and promptly including independent authorship for reporting of information, assessment, and plan.
	CSDR.7	Perform common procedures safely and correctly, including participating in informed consent, following universal precautions, and sterile technique while attending to patient comfort.
	CSDR.8	Identify common cognitive biases and implement mitigation strategies to reduce the impact of cognitive biases on decision making and patient care.

Effectively communicate with patients, families, colleagues and interprofessional team members (C)	C.1	Demonstrate the use of effective communication skills and patient-centered frameworks in history taking and physical examination
	C.2	Explain common diagnostic and therapeutic interventions, assessment, plan, and underlying rationale to patients, families and caregivers and provides counseling and education with attention to patient centered language and health literacy.
	C.3	Communicate clearly and effectively with colleagues within one's profession and team, consultants, and other members of the interprofessional team.
	C.4	Communicate effectively using digital technology, including EMR and telehealth, to optimize decision making and treatment of individuals and across the health care system.
Practice relationship centered care to build therapeutic alliances with patients and caregivers (PCC)	PCC.1	Demonstrate humanism, integrity, respect, honesty, compassion, accountability, cultural humility, and responsiveness
	PCC.2	Demonstrate a commitment to ethical principles pertaining to autonomy, confidentiality, justice, equity, and informed consent.
	PCC.3	Explore patient and family understanding of well-being, illness, concerns, values, and goals in order to develop goal-concordant treatment plans across settings of care.
Exhibit skills necessary for personal and professional development needed for the practice of medicine (PPD)	PPD.1	Demonstrate trustworthiness and responsible behavior needed for the care of patients, including completing duties and tasks in a timely, thorough, and reliable way.
	PPD.2	Demonstrate awareness of one's own limitations, seek additional help when needed, display professionalism and flexibility needed to manage the uncertainty inherent to the practice of medicine.
	PPD.3	Identify opportunities for growth in one’s performance through informed self-assessment and reflective practice, goal setting and actively seeking and incorporating feedback to improve.
	PPD.4	Locate, critically appraise, and synthesize information to support evidence-informed, patient-centered clinical decisions while implementing new knowledge, guidelines, and technologies demonstrated to improve patient outcomes.

Demonstrate knowledge of health care delivery and systems needed to provide optimal care to patients and populations (HS)	HS.1	Work with the interprofessional team, demonstrating respect for the unique cultures, values, roles/responsibilities, and expertise of team members to address the needs of patients and coordinate patient care across healthcare systems.
	HS.2	Describe patient safety interventions and continuous quality improvement methods that enhance care for patients and populations
	HS.3	Explain how the healthcare system, health policy, economic factors, prevention efforts, health programs, and community organizations influence the health of individuals and communities.
Exhibit commitment to promoting and advancing health equity for all patients (HE)	HE.1	Demonstrate understanding of the historical and current drivers of structural inequities, their impact on healthcare, research, medical decision making and disparities in health outcomes.
	HE.2	Explain how one's own identity, lived experiences, privileges, and biases influence their perspectives of colleagues, patients, and clinical decision making.
	HE.3	Identify and explain potential strategies to reduce health disparities in patients and communities at the individual, local, community, and systems-based levels.

Course Description & Goals

The Learn, Experience, Advocate, Discover, Serve (LEADS) course is centered on health equity—the concept that all should have the opportunity to achieve their optimal health. Through LEADS, we will consider the factors that influence the health of individuals at personal and social levels as well as the structures and systems that have resulted in health inequities both historically and in current times. We will examine our roles as advocates for justice in service to others as physicians and practice skills to enable the advancement of health equity. LEADS meets for 5 weeks in the first year and 4 weeks in the second year in addition to LEADS content integrated into the PISCEs and Doctoring courses. The first two weeks of the year (Health Equity and LEADS 1) cover foundational core content in these topics before all students enter a focus area to explore in more depth in addition to continuing with core content (LEADS 2 and 3). During the final first year week of LEADS 4, track-based time starts where students will have increased time to explore their focus area as a track or participate in the research track (if selected earlier in the year) during track time. Every student completes an individual advocacy project (Op-Ed, narrative or graphical medicine) during LEADS 4 on a chosen topic.

In the second year of LEADS, we start with a focus on health care systems including how health care is delivered and financed at the local level and more widely (Health Systems Week). We will discuss how health systems and access to care impact health and how the design of a system promotes or impedes health equity. In subsequent weeks (LEADS 5-7), there is increased track-based time to explore your track area in more depth. Those working in LEADS content tracks will work in small groups to investigate a pressing issue related to health and propose an evidence-based project to address the issue utilizing the tools of quality improvement, education or community interventions. Every group will have the opportunity to present their work both in track (orally) and at our year-end culminating LEADS Symposium (poster).

Course Learning Objectives

By the end of the course, the student will be able to:

1. Define health equity and terms related to personal, social, political, and other structural factors that impact health. (HE.1)
2. Reflect on how the intersection of personal identities, biases, and lived experiences influence perspectives, interaction with others, clinical decision making, and health outcomes while applying the principles of cultural and structural humility. (HE.2)
3. Define disparities in health and health care at the population level and recognize the multiple roots of those inequities including the impact of racism and biases as well as potential solutions. (HE.1, HE.2)
4. Describe how historical and current social, political, and structural factors impact health and propagate inequity for marginalized populations at all levels from the individual to the planetary. (HE.1)

5. Recognize how adversity and trauma affect human health and development, including factors that promote resilience and well-being both personally and professionally. (MK.1, PPD.2)
6. Define factors that promote health and apply a strength-based approach at the level of the individual across the lifespan and at the family and community levels. (MK.1, HE.3)
7. Identify health inequities in Boston neighborhoods, the impact of social drivers on health in our communities, and how physicians can work with local organizations to improve the health of patients, including through participating in service-learning. (HE.1, HE.3)
8. Define the goals and methods of public health and describe how the field of public health relates to the practice of medicine. (HS.3)
9. Recognize the impact of language and communication on professional relationships, health care delivery, the patient experience and health outcomes particularly in diverse, multicultural populations. (C.1, C.3)
10. Describe the structure and financing of health care systems including their inclusivity, methods of health promotion, and health outcomes from the local to international levels. (HS.3)
11. Define and apply the processes of quality improvement, patient safety and interprofessional teamwork as tools to improve patient care and promote health equity. (HS.2)
12. Apply the four major ethical principles (beneficence, non-maleficence, autonomy, justice) when considering the design of interventions and the distribution of resources to promote health. (PCC.2)
13. Recognize the role of the legal system in health care and its potential impact on patients, families, communities, and physicians. (HS.3)
14. Apply the principles of critical appraisal, including consideration of the use of sociopolitical categorizations, to evaluate medical literature to foster self-directed learning and advance health equity. (MK.3, PPD.4)
15. Define the process of research, including ethical considerations and factors that contribute to the trust or mistrust of the health care system. (MK.3, PCC.2)
16. Engage in reflection on the richness of human experience in health and illness through the reading and discussion of narrative media. (PCC.1)
17. Demonstrate how physicians can function as advocates for patients and for the health of communities by producing compelling oral, written or graphical advocacy content. (HS.3, HE.3)
18. Define methods to advance health equity and propose an intervention guided by existing evidence that utilizes one of the methods to promote health and social justice. (PPD.4, HS.3, HE.3)
19. Demonstrate effective communication skills to explore complex health-related topics with diverse audiences. (C.1, C.2, C.3)

Course Contact Information

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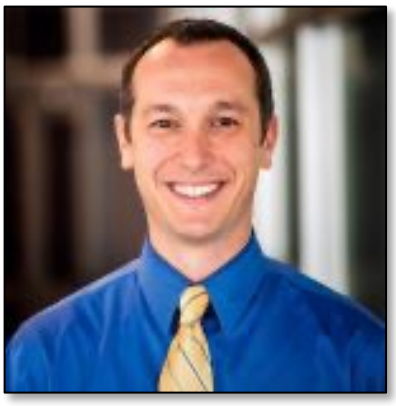

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Focus Area/Track Directors

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Course Improvement and Feedback

Recent Changes to the Course

LEADS was a new course in the 2022-23 academic year. Since then, we have continued to evolve the curriculum through added opportunities to hear from outside speakers on current topics relevant to the health of the public and expanding our opportunities for experiential learning through involvement with outside community organizations in class. We have current issues inform our skills-based learning with a first year focus on advocacy where every student creates a project demonstrating their advocacy messaging skills and a second year focus on skills development towards actionable solutions to real world challenges.

Curricular Committee Representatives

The Medical Education Committee (MEC), Pre-clerkship Curriculum Subcommittee (PCS), Clerkship Curriculum Subcommittee (CCS), and Electives Curriculum Subcommittee (ECS) each include two student representatives from each academic year, one voting member, and one alternative member, for a total of eight student representatives on each committee. Information about current membership is available on the website at: https://www.bumc.bu.edu/camed/education/md/medical-education-committees/

Student Advisory Committee (SAC)

In order to respond to medical students' concerns in a timely fashion and to allow for student-faculty dialogue about the course, a Student Advisory Committee will be selected at the start of the year and convened after each LEADS week. We expect students and faculty to demonstrate openness to each other's ideas and to have a solution-oriented focus. Details will be posted on Blackboard. All students are encouraged to bring any concerns (whether about the course, lectures, online materials, or interview exercises) to one of their SAC representatives or curriculum committee representatives. A group of students who are curriculum committee representatives will serve as longitudinal members of all SACs to ensure recurrent themes across all modules are shared with the course directors.

Diversity, Equity, and Inclusion Initiatives

Diversity, Equity and Inclusion are of utmost importance at Chobanian & Avedisian School of Medicine. This course is centered on addressing competencies related to equity and promoting knowledge, skills and attitudes to support diverse and inclusive learning and clinical environments. Below are some of the multiple initiatives and groups we have at the medical school. Our pre-clerkship faculty and students created the first website listed and continue to work on faculty development related to inclusive language.

- Education Resources and Initiatives for Inclusivity: https://www.bumc.bu.edu/dei-classroom-resources/
- Disability and Identity Vertical Integration Group: https://www.bumc.bu.edu/camed/education/md/medical-education-committees/working-groups/#divig
- Racism in Medicine Vertical Integration Group: https://www.bumc.bu.edu/camed/education/md/medical-education-committees/working-groups/#rimvig
- General & Sexual Diversity Vertical Integration Group: https://www.bumc.bu.edu/camed/education/md/medical-education-committees/working-groups/#gsd

Course Schedule

The Academic Calendar is located on the Medical Education Office's website at: https://www.bumc.bu.edu/camed/education/md/curriculum-overview/academic-calendars/.

Students need to add the LEADS google calendar to your personal calendar through the link provided there. This is your best source of up-to-date information on class timing and locations.

Students should refer to Blackboard for specific schedules and assignments.

Instructional Design

Instructional Methods Definitions

Definitions:

- Learning Period: between framing (beginning) and consolidation (before LPA) (2-3 weeks). There are typically 2 learning periods in a module.
- Learning Unit: Content Delivery and application. Typically, there are 2-3 learning units in a 2-week learning block and 3-4 learning units in a 3-week learning block.

Note these are the standard definitions of methods that may be used. In LEADS, the timing is adapted to the one-week period of each LEADS week.

1. **Framing**
    a. Definition: introduction to the Learning block where module directors provide a framework or context for the future learning that will happen in the 2- or 3-week time period. A framing session describes what will be learned, how it will be learned and how students will know if they have successfully learned it. It should be reviewed before any guided self-learning begins.
    b. Attendance: Pre-recorded Video, no attendance, may be repeated at the introductory session
    c. When this typically happens: Wednesday before the first day of a learning period and at the introductory session
    d. Materials: Slides, learning objectives, definitions, baseline information. Framing cases and introductory session
2. **Introductory session**
        1. Definition: introduction to the Learning block topics; presentation of framing cases. This is a session when the module directors discuss how a module will run, review requirements, deadlines and faculty availability for the module. The module directors will highlight discipline specific clinical reasoning and foundational information needed to succeed in the module.
    b. Attendance: Optional in person (this will be recorded)
    c. When this typically happens: Beginning of a learning period
    d. Materials: Slides, Schema, and one pager summarizing slides (if applicable)
3. **Framing Cases**
    a. Definition: Representative patient cases for the learning period with big picture prompting questions (from the learning objectives) to help frame what students will be learning in guided self-learning and applying in the learning period.
    b. When this typically happens: Students should try to answer these 8 questions while doing their guided self-learning throughout the learning period. There are 8 prompting questions for each framing case and one question will be assigned to

each of the 8 students in the TBL group. That student will be responsible for serving as a content expert in that area for their peers during consolidation.

4. **Guided Self-Learning**
    a. Definition: Educational materials (self-learning guides, lectures, videos etc.) that give students the foundational knowledge needed for application sessions. These materials are given to students on Blackboard in advance of the application sessions (Small group application sessions, Team-Based Learning, Large group application exercises); knowledge self-assessment questions will be given to students to check their understanding of the content provided. Due dates for these are posted on Blackboard and are before the application sessions. These will be posted no later than 1-week before any application sessions relevant for that content.
    b. When this typically happens: Day 1 and 2 of a one- or two-week learning block and day 5 and 6 of a two-week learning period.
    c. Materials: Self-learning guide
5. **Self-Study**
    a. Definition: students direct their own studying outside the classroom; no specific materials or new content provided.
    b. When this typically happens: In the afternoons when students do not have doctoring small groups or patient care.
    c. Materials: None
6. **Open Discussion**
    a. Definition: time for faculty to review material from Guided Self-Learning Materials, highlight key, and challenging concepts, from SLG's and to do just-in-time teaching for topics that students need more clarity; opportunity for students to review material and ask questions of faculty on the week's topics or guided self-learning materials
    b. Attendance: Optional attendance, session is recorded
    c. When this typically happens: After guided self-learning
    d. Materials: None
7. **Team-Based Learning (TBL)**
    a. Definition: "An active learning and small group instructional strategy that provides students with opportunities to apply conceptual knowledge through a sequence of activities that includes individual work, teamwork, and immediate feedback." (1). Students come prepared to take a graded individual and team knowledge readiness assessment (IRAT and TRAT) where a shared understanding of material is established, and unclear concepts are clarified. In this application session, students apply the foundational material from SLG's and then apply that material in facilitated active learning cases with simultaneous response so student teams have to commit to their answers. Students are in teams of 8 for at least 1 semester and a peer evaluation of team members is completed.
    b. Attendance: Required

c. When this typically happens: After guided self-learning (day 3 or 4 of a one- or two-week learning period, and day 7 or 8 of a two-week learning period).
d. Materials: 1 pager pre-TBL with LO's, required material to review

8. **Small Group Applied Learning**
    a. Definition: an application session in which students work in small groups (either with or without faculty facilitation) to apply concepts learned in guided self-learning. Examples are labs or case-based learning
    b. Attendance: Required
    c. When this typically happens: After guided self-learning (day 3 or 4 of a one- or two-week learning period, and day 7 or 8 of a two-week learning period).
    d. Materials: Case handouts for students (post to blackboard) and case answer key with thought process provided after session or lab materials
9. **Large Group Applied Learning**
    a. Definition: an application session when the whole class works together to apply concepts learned in guided self-learning. Examples are faculty facilitated large group case-based learning that included pauses for students to work through cases and solve problems.
    b. Attendance: Required
    c. When this typically happens: After guided self-learning (day 3 or 4 of a one- or two-week learning period, and day 7 or 8 of a two-week learning period).
    d. Materials: Slides with cases or case handouts for students (post to blackboard) and case answer key with thought process provided after session
10. **Large Group Lecture**
    a. Definition: Core content delivered from one or many faculty members. These sessions are focused on content delivery. New material not previously delivered in guided self-learning are taught. There will be knowledge self-assessment questions required after these sessions. These sessions may include active student engagement through clicker questions, think pair share, muddiest point.
    b. Attendance: Not required, sessions will be recorded.
    c. When this typically happens: Depends on the modules. Should be before application sessions for the material discussed.
    d. Materials: Slides for students (post to blackboard)
11. **Live Patient Session**
    a. Definition: A patient, group of patients come to the class to share their experiences with the class
    b. Attendance: Required
    c. When this typically happens: Depends on the module
    d. Materials: none
12. **Consolidation Session**
    a. Definition: Application session at the end of the learning period to revisit the content learned. The framing cases will be the backbone of this session and students will revisit the patient cases and take a more specific look at the issues in the case (as opposed to the big picture questions asked during the beginning

of the learning block). Some of the cases will unfold to provide more information to further students' understanding of the concepts learned in the learning block. There will be opportunities for peer discussion and Q&A. Students groups should work through cases and then faculty review big picture concepts and questions in preparation for the LPA.

b. Attendance: Required
c. When this typically happens: At the end of a learning period.
d. Materials: Slides for kick-off case review and expansion. No other materials necessary.

13. **Integrated Case Session**
    a. Definition: Specifically, designed patient cases to integrate content learned across systems. Faculty facilitated large group sessions with group work and discussions at tables. Patient cases that help apply information, integrate and consolidate content learned, and revisit content seen already.
    b. Attendance: Required (unless re-examination happening that week)
    c. When this typically happens: During weeks when LEADS is running.

Assessment and Grading

Course Year 1

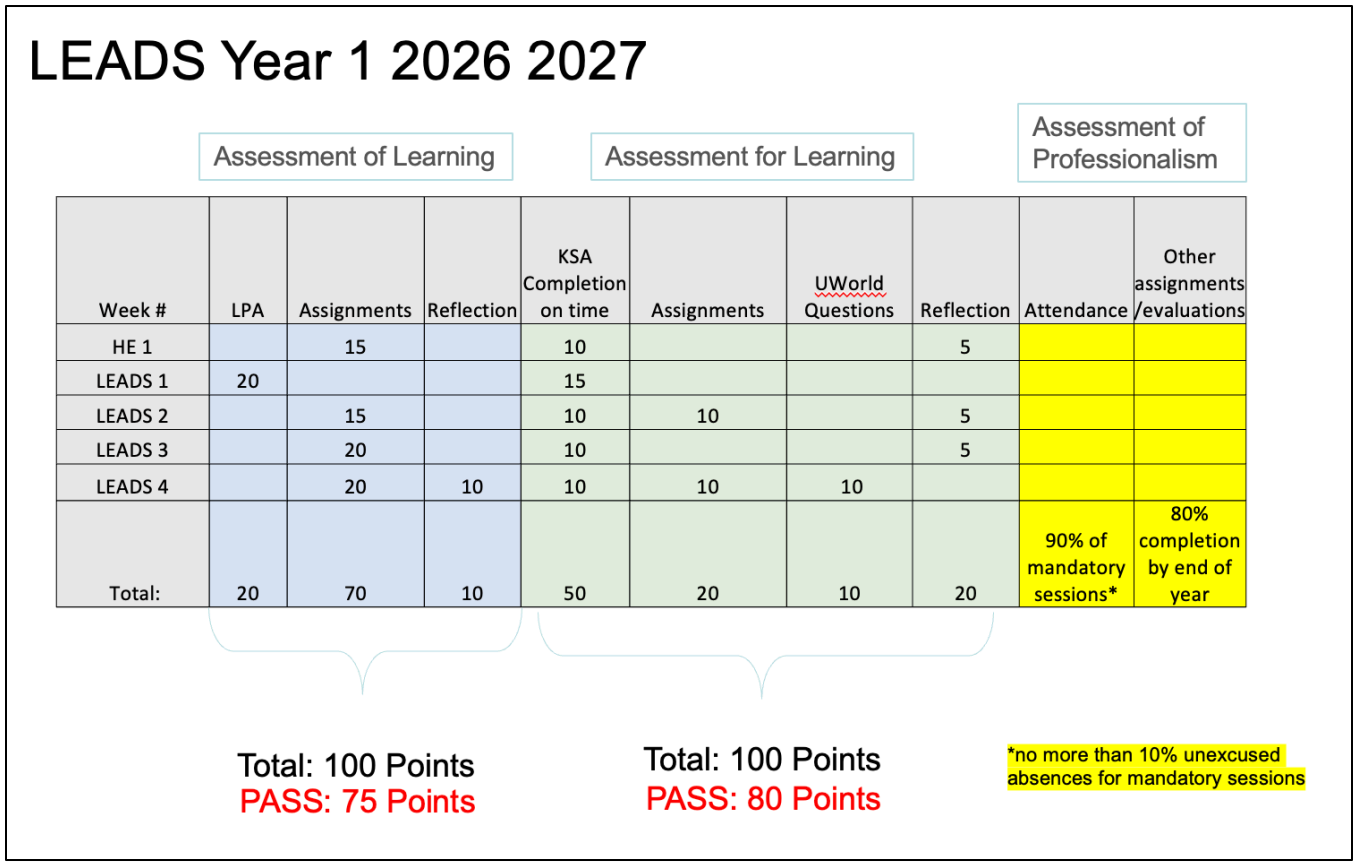
The LEADS course continues over two years. This course document reviews the components of the first-year module. In LEADS year 1, the course (MS 137) is made up of 5 weeks. The weeks are a weighted percentage of your final course grade for year 1 and are listed below. Each week will also have an associated assessment table describing the assessment components of the week and the weight of each component. Each week will have assessments that contribute to your final grade for the module at the end of the year. LEADS is pass/fail and the grade for module 1 will be recorded at the end of the year.

LEADS Year 1 (MS 137)	Start Date	End Date
Health Equity Week	8/10/2026	8/14/2026
LEADS Week 1	9/28/2026	10/2/2026
LEADS Week 2	1/4/2027	1/8/2027
LEADS Week 3	3/15/2027	3/19/2027
LEADS Week 4	5/10/2027	5/14/2027

Course Grading Policy

LEADS course grades are based on the following assessment components and the weight of each of those components is listed in the general information section on the Blackboard page.

Students are assessed in three ways in each course: assessment of learning (summative), assessment for learning (formative) and professionalism expectations.



Week #	LPA	Assignments	Reflection	KSA Completion on time	Assignments	UWorld Questions	Reflection	Attendance	Other assignments /evaluations
HE 1		15		10			5		
LEADS 1	20			15					
LEADS 2		15		10	10		5		
LEADS 3		20		10			5		
LEADS 4		20	10	10	10	10			
Total:	20	70	10	50	20	10	20	90% of mandatory sessions*	80% completion by end of year

Assessment of Learning or Summative Assessments

(highlighted in blue in figure):

Assessment of learning is composed of three components and determines whether you pass a course: a) Learning Progress Assessments (LPAs); b) Assignments; and c) Reflections. There is one LPA in LEADS Year 1 at the end of the first 2 weeks of foundational content, worth 20% of the grade for the year in the course. The assignments are specific to each week and are worth 70% of the total grade for the year. There is a culminating reflection worth 10% of the grade for the year. To pass the course, students need a total of 75 points out of 100 in this category.

- Learning Progress Assessments (LPAs): The one LPA in LEADS Year 1 is taken at the end of the second week of LEADS prior to entry into focus areas to solidify the course's foundational knowledge. The LPA is taken in ExamSoft. It is comprised of multiple-choice questions focused on application of the material. They are assessing the learning objectives and content from the application sessions and practice LPA questions. All questions are application of material you have learned.
- Open Ended Questions (OEQs): An LPA may include 1 summative open-ended question as part of the LPA in Exam Soft. Students will receive a percentage of the points designated to the OEQ's based on their OEQ percent correct. There is no specific re-examination for OEQs, but students will still need to get a score of >75 points total in the Assessment of Learning (summative) category to pass the course.
- Assignments: In some weeks, there are assignments based on small group cases that occur during the week or culminating case-based assignments that apply the content for the week. Some are group assignments, and some are individual. These are graded based on rubrics posted to Blackboard. At the end of first year, there is an advocacy project assignment that all students will complete.
- Reflection: There is one culminating written reflection at the end of the year in this category.

LPA Grading Guidelines

- If student gets <70% on an LPA, they need to re-examine. (attempt 1) Incomplete on transcript until reexamination
- If they get > or equal to 75% on the re-examination they pass. (attempt 2) P on transcript.
- If they get <75% on the re-examination, they need to remediate that exam at the end of the year (attempt 3) and the FAIL on transcript and will change to FAIL/PASS on the transcript if or equal to 75% on end of year remediation exam
- If they fail the remediation exam, they will need to repeat the course

The LPA reexamination will consist of a similar number of questions and a student must receive >75% correct.

If a student receives a score of <70% on any LPA they must:

- Re-examine on the next reexamination date on the calendar unless delaying has been discussed with the course directors.

Other Notes: We round the final LPA grade > or equal to 69.50 up to 70 and course completion points from 74.50 to 75. No grades are rounded up before the course grade calculation. If you score 74.49 and below, your score will round down to 74.

Course Final Grade

If at the end of a course, a student receives < 75 points total, from the assessments described above, they will FAIL the course (F on the transcript) and need to take a comprehensive re-examination. A comprehensive re-assessment includes all of the content in the course.

On re-assessment if a student gets:

- > or equal to 75% on the comprehensive re-examination, they pass the course = FAIL/PASS(F/P) on transcript
- <75% on the comprehensive re-examination, they fail the course and have to take a remediation exam during one of the remediation dates and the end of the year. F/P on transcript if >75% on the comprehensive remediation exam
- If they fail the remediation exam, they will need to repeat the course.

Monitoring your performance as a student:

Students are expected to monitor their performance throughout the course. Students should recognize that they are at risk of failing a course if their average on any one of the three major assessment categories is < 75%, i.e. LPA score, assignment average score or reflection score. Students can see their grades for all categories on Blackboard and are encouraged to use Examsoft to review their strengths and opportunities post-LPA.

Assessment for Learning or Formative Assessments

(highlighted in green in figure)

Assessment for learning (formative assessments) are activities intended to help you to learn foundations needed for application, practice questions needed to prepare for the LPA or boards and to revisit content you were previously exposed to. The learning methods used are knowledge self-assessment (KSA) questions, assignments, UWorld questions, and reflections. To pass the course students need to get 80 points out of the 100 in this category.

This category is graded as done/not done. If you complete ALL of your KSA questions on time for a week, you get the full points, if not you get 0 points for that assignment. All course work must be completed by the deadlines provided in Blackboard.

If students receive ≤80 points, they will receive an F on their transcript and will need to complete any missing work within 48 hours of notification of their not passing by the course manager. If the additional work is completed on time, the student will receive an F/P. If the make up work is not done on time, the student will need to take a comprehensive remediation exam at the end of the year and receive a score > or equal to 75% to receive a pass.

Assessment for Learning (Formative) Activities:

- Knowledge Self-Assessment (KSA): These are questions that are intended for learning. They are questions that help you check your understanding of the content you have studied in the self-learning guide and provide you with feedback. They have a deadline for completion (listed in Blackboard) so faculty can review class performance and review challenging content for students during an open discussion or application. Student performance on the KSA is not assessed nor is it part of the credit. Credit is based only on completing questions by the due date. No credit will be given for KSAs completed after the due date unless prior arrangements were made with the course directors for an excused absence. These questions are meant for learning, and students will learn from getting questions incorrect so are encouraged to not wait until they feel 100% comfortable with the material.
- UWorld® Questions: In some weeks, students will be assigned UWorld Board review questions in the content area they are studying. Student performance on these areas will not determine the points given, they simply need to be completed. UWorld performance should be discussed with faculty during weeks when Individualized Learning Goals need to be submitted and should be incorporated into these goals.
- Assignments: In some weeks, students have assignments based on the content of the week. In this “of learning” category, you receive credit for completing the assignment on time as specified.
- Reflection: In some weeks, there is a written reflection on the week’s content due at the end of the week.

Professional Responsibilities (highlighted yellow in figure):

In addition to assessment of learning and assessment for learning, students need to complete their professional responsibilities and expectations. These include peer assessments, course evaluations and attendance.

Attendance

In addition, attendance at mandatory sessions (as identified in the LEADS google calendar) is a requirement and an expectation of all students enrolled in the curriculum. Sessions labeled as mandatory have been chosen because the instructional method requires in-person attendance. If a student misses more than 10% of mandatory sessions classes in the course without notification of an excused absence, they will receive a professionalism notification.

Course/Module/Faculty Evaluations

Your feedback is extremely important to improving the courses. The school and faculty take these very seriously. An 80% completion rate is required for evaluations you are assigned.

Remediation

If a student scores < 75% on a re-assessment, they will receive a FAIL on their transcript and will be required to take a remediation exam at the end of Year 1 before promotion to Year 2. Three remediation dates are set at approximately 2-week intervals following the year end date; students may choose which of those dates they prefer for their remediation in discussion with the Office of Academic Enhancement. We post the remediation exam dates and online registration for remediation in late spring. Students who need to take two or more remediation exams must seek permission from the SEPC (Student Evaluation and Promotion Committee) to sit for remediation examinations. To pass a remediated course, students must earn a grade of >75%. If they score >75% on the remediation exam, the transcript will change from F to P.

Grade Appeals

According to section 2.2 in the General Policies Governing Student Evaluation, Grading, and Promotion, a student who chooses to appeal a regular (i.e., not remediated) grade must follow these procedures:

- Submit a written grade appeal to the Module, Course, Clerkship, or Rotation Director no more than 15 business days after the date on which the grade is officially recorded in the Registrar's office.
- The Module, Course, Clerkship, or Rotation Director must provide a written decision to the appealing student within 30 calendar days of receipt of the appeal.

Reporting Grades

Numerical grades for medical students are reported to the Student Affairs Office and the Medical Education Office for tracking purposes. Any student who does not pass an assessment will have this information shared with their advisor to provide academic support.
Expectations

- Refrain from any conversation with your peers while in the L-11 testing space, including within the vending room and elevator waiting area, until you are on the elevator
- Don’t seek or receive copies of assessments
- Signing in classmates for sessions is considered cheating and violations will be referred to Medical Student Disciplinary Committee
- If you are aware of any violations of the ethical standards listed above, within the Student Disciplinary Code of Academic and Professional Conduct, or otherwise, report it to the Course Director

Roles and Responsibilities

The LEADS Course Directors, Track Directors, Faculty, and Course Managers are committed to the success of every student in the class.

Course Directors

- Ensure delivery of LEADS course objectives and intentional longitudinal progression of the PISCES and LEADS threads.
- Oversee curriculum content throughout the course and ensure deliberate spiraling and interleaving.
- Meet with track directors and ensure adherence to MEO policies, instructional design expectations, and MEC recommendations.
- Review Educational Quality Improvement data with each track director and provide feedback and suggestions for improvement.
- Develop expertise in Team-Based Learning and attend sessions at regular intervals.
- Work with the SAC and review student feedback on an ongoing basis and suggest improvements.
- Meet with students who are having academic difficulty.
- Work with the Academic Enhancement Office to recruit and schedule group tutoring/coaching for the modules.
- When the course is in session, should respond to email from students within 24 hours on weekdays and 48 hours on weekends unless student writes URGENT in subject line which is reserved for students experiencing a personal emergency.

Course Manager

The Course Manager is responsible for the administrative and organizational support of LEADS.

- Assist course directors (CD) and Track Directors with:
- creating class schedules
- recruiting, contacting, and coordinating personnel (lecturers, tutors, teaching assistants/facilitators, proctors).
- Prepare self-learning guides, content and knowledge self-assessments for Blackboard.
- Provide knowledge self-assessment data to module directors in real time.
- Proctor assessments.
- Manage all grade and evaluation data for the course.
- Act as a liaison between faculty and students, field questions and concerns.
- Will respond to email from students within 24 hours on weekdays and 48 hours on weekends.

Focus Area/Track Directors

- Serves as the primary contact for students with focus area and track-related issues.
- Provides answers and explanations to student inquiries regarding any aspect of the track content.
- Provides advice and assistance to students for improving their learning strategies and performance in the course.
- Reviews evaluations and, with the LEADS and Medical Education Office leadership (MEO), implements appropriate changes in sessions and Track based on student feedback.
- Ensure that all faculty are teaching using the MEO instructional design expectations and requirements,
- i.e. creating TBL, other large group active learning formats and equity principles.
- Recruit faculty and communicate with them regarding scheduled teaching time and deadlines for teaching materials
- Ensure that the module addresses Step 1 content, i.e., see First Aid for Step 1
- Prepare, review, and edit all assessment questions (formative and summative) in accordance with course and examination policies and guidelines (see separate document).
- Proctor assessments.
- Attend the post-assessment review session and answer questions from students.
- Meet with all students who fail an assessment requiring reexamination and be available to review questions.
- Attend Student Advisory Committee (SAC) meeting(s).
- Respond in a timely manner to students with questions or concerns regarding the Track.
- Provide feedback and faculty development to all faculty teaching Track content and share student evaluation data annually
- When the course is in session, should respond to email from students within 24 hours on weekdays and 48 hours on weekends.

Additional Course Faculty

- Faculty are responsible for covering the learning objectives in their educational materials and sessions in a way that is focused and consistent with the instructional design of the course.
- Answer questions in, or outside of, class via e-mail, face-to-face, open discussion sessions, and class discussion boards.
- Create clear and fair exam questions that assess student learning and application of the course content based on the learning objectives.
- Demonstrates inclusive curricular design and language.
- When the course is in session, should respond to email from students within 48 hours.

Students

As adult learners, students are expected to:

- Use all provided resources to meet the learning objectives of the module
- Complete all assignments
- Come prepared to participate in all active learning sessions (small and large group applied learning, TBL, PBL, and consolidation sessions)
- Participate actively in all sessions: answer questions posed in class and ask questions when information is unclear or more information is needed
- Optimize learning strategies by trying the suggested study tips and other suggestions provided by course leadership
- Recognize gaps in understanding and knowledge, and proactively seek help from the course director and tutor coordinator when needed
- Notify the course director and coordinator as soon as possible if illness or an emergency prevents attendance at any assessments or required sessions.
- Provide constructive and collegial feedback regarding the course in MedHub and to faculty and peers in person
- Adhere to all BU and Chobanian & Avedisian School of Medicine policies outlined in the General Student Policies section.
- Adhere to team charter and team expectations

Instructional Tools

Blackboard

Each year of LEADS has a Blackboard site (MD137 LEADS Year 1 (2026-2027), located at http://learn.bu.edu.

General course information and contacts can be found on the Blackboard site.
We will post week specific schedules, learning materials, assignments, along with week-specific information on grading for each week of LEADS.

Students who have questions about the Blackboard site or find that they do not have access to the site should contact the Course Director or Course Managers for assistance.

MedHub

MedHub provides students with the ability to evaluate and provide feedback on all courses within the School of Medicine, monitor their own learning progress and achievement of objectives, and view and update their student portfolio. https://bu.medhub.com/

Instructional guides for MedHub can be found at: https://www.bumc.bu.edu/edtech/medhub-resources/. Additional help resources are also available within MedHub, under the “Help” tab.

Please see the Student Evaluation Completion Policy section below for expectations around student-submitted course and faculty evaluations.

Note Taking and Studying Tools

The Alumni Medical Library has compiled some recommended tools for students looking to take notes and study digitally, including resources to help reduce eye strain or fatigue.
A list of their recommendations can be found on their website:
https://www.bumc.bu.edu/medlib/portals/camed/pdfutilities/

Echo360/Technology

Echo 360 recordings need time to be downloaded, edited, and compiled. As a general principle, recordings will be available 24 hours after the learning activity. For Consolidations days, Education Media will make every effort to have recordings available by 6 pm.
Echo360 may only be used for streaming captured lecture videos; the videos may not be downloaded. Taking smartphone or digital pictures or videos of any part of the lecture in class, or at home, is similar to downloading and is not allowed. There are a number of reasons for this, including that students and/or the University may be liable for violations of federal copyright and privacy laws as a result of the use of copied material.

If you experience any technical problems, please report the issue in one of the following ways to generate an IT ticket:

- Echo360 Related Issues: Create a ticket on the Ed Media site (http://www.bumc.bu.edu/bumc- emc/instructional-services/echo360/): sign in and provide pertinent information that will enable an effective response. Have a link to the problematic video ready to copy/paste into this form.
- Educational Technology Related Issues: For assistance with technology supported by BUMC's Educational Media (e.g. ExamSoft), email edtechhelp@bu.edu to create a ticket.
- Other Technology Related Issues: For assistance with BU-wide technology, such as Blackboard, email an example (e.g. picture or very brief phone video) to ithelp@bu.edu with a descriptive subject line and give as many details as possible on the what, where,

how you are using the service and what type of computer, browser, etc. along with type of student (i.e. M1). Always include link(s) or screen shots of where the issue is occurring.

Student Support Services

Academic Enhancement Office

The Academic Enhancement Office (AEO) supports the academic and personal success of all medical students. Recognizing that individual students have different needs in order to be successful in medical school, various programs and services are available to all current Chobanian & Avedisian School of Medicine medical students. Programs are designed to help students adjust to the rigors of medical school and strive to learn balance, with more effective study habits that promote and sustain lifelong learning. Through small group sessions and individual meetings, we work with students to leverage the necessary skills to balance academic and personal growth. https://www.bumc.bu.edu/camed/student-affairs/md/advising-career-development/academic-enhancement/

Tutoring

Peer tutors may be requested via the Academic Enhancement Office's Peer Tutoring Program at: https://www.bumc.bu.edu/camed/student-affairs/md/advising-career-development/academic-enhancement/peer-tutoring-program/.

Disability & Access Services

Students who wish to request accommodations for learning at Chobanian & Avedisian School of Medicine can do so through Disability & Access Services. Information about the process is available on the Academic Enhancement Office's page: https://www.bumc.bu.edu/camed/student-affairs/md/advising-career-development/academic-enhancement/accommodations-for-learning/.

Disability & Access Services' goal is to provide services and support to ensure that students are able to access and participate in the opportunities available at Boston University. In keeping with this objective, students are expected and encouraged to utilize the resources of Disability & Access Services to the degree they determine necessary. Although a significant degree of independence is expected of students, Disability & Access Services is available to assist should the need arise. https://www.bu.edu/disability/accommodations/

General Student Policies

Attendance & Time off Policy

This policy addresses the expectations for student attendance and the procedures for requesting time off. The attendance & time off policy is located at: https://www.bumc.bu.edu/camed/offices-services/md-program-offices/medical-education/policies/attendance-time-off-policy/

All students who will be absent from a mandatory session, must complete the excused absence form, linked in Blackboard, in advance of the session they will be missing. Any student who is out for more than 3 days will need to discuss this with the Associate Dean of Medical Education.

Medical Student Disciplinary Code of Academic and Professional Conduct

The School of Medicine expects all students to adhere to the high standards of behavior expected of physicians during all professional and patient care activities at the school and all of its academic affiliates. All students must uphold the standards of the medical profession. This includes, but is not limited to, being respectful of patients, staff, members of the faculty, their peers, and the community, being aware of the ways in which their conduct may affect others and conducting themselves with honesty and integrity in all interactions.

Students are also required to adhere to the highest standards of academic honesty and professional conduct in relation to their coursework. https://www.bumc.bu.edu/camed/files/2025/05/Medical-Student-Code-of-Conduct-and-Disciplinary-Procedures-Final.pdf

Policies and Procedures for Evaluation, Grading and Promotion of Boston University School of Medicine MD Students

This is a school-wide policy and can be located at: https://www.bumc.bu.edu/camed/offices-services/office-of-the-dean/evaluation-grading-and-promotion-of-students/

A student who is unable to take a scheduled LPA due to medical or family emergency must immediately notify the course manager, course director(s) and the Associate Dean of Medical Education at prgarg@bu.edu.

The Associate Dean of Medical Education may ask students to provide supporting documentation for their absence. Students should arrange directly with the course manager and the Associate Dean of Medical Education to take make- up LPAs due to acute illness or emergency that can be made up within 3 days. If the LPA cannot be taken within 3 days of the original date, the student will meet with the Associate Dean of Medical Education. Student Affairs will be notified if a student needs additional support.

- LPAs or exams/OSCEs are not to be postponed or taken early, unless for a compelling reason, e.g., personal illness or family emergency, or if approved by the Associate Dean of Medical Education
- Students must meet with the Associate Dean of Medical Education for any late or missed LPAs or exams that were not previously excused.
- Students who arrive late may take the LPA or exam with remaining time, at the discretion of the course director(s)
- Students who miss an LPA or exam, unexcused, will receive a zero for that LPA or exam
- The full policies can be found here:
    - LPA or exam Policies for Medical Students: https://www.bumc.bu.edu/camed/offices-services/md-program-offices/medical-education/policies/exam-policies-for-medical-students/
    - L-11 Testing Center Policies: https://www.bumc.bu.edu/camed/offices-services/md-program-offices/medical-education/policies/l-%2011-testing-center/

Student Evaluation Completion Policy

The school considers the completion of course and clerkship evaluation to be part of a student's professional responsibilities and essential feedback for the ongoing monitoring of the learning environment. To obtain adequate feedback, all students must complete at least 80% of the evaluations assigned to them in each academic year. This includes all types of evaluations including course, module, clerkship, site, individual faculty, and peer.

Process:

All evaluations are sent to students in the MedHub evaluation system. Students will be oriented to MedHub at multiple points during the four years.

Preclerkship Phase:

The Medical Education Office will randomly assign each student into a cohort of approximately 1/3 of the class at the beginning of the year. Each cohort will only be assigned a subset of total evaluations for the course and faculty evaluations in all courses where there are greater than 20 students participating.

Evaluations will be assigned to students at the beginning of a week so students have access to all evaluations and can complete them on time. Individual faculty evaluations are best done directly after a session and saved for submission at the end of the week to incorporate feedback from all sessions that faculty participated in. LEADS week evaluations should be completed after the end of the week.

In order to obtain actionable feedback, evaluations must be submitted via MedHub within 9 calendar days of the completion of the LEADS week (usually the following Sunday). Deadlines are posted on Blackboard for all students. Evaluations not completed within the assigned time frame will expire and are no longer available for completion by the student.

All students, regardless of cohort assignments will be required to complete evaluations for:

- Groups or class is less than 30 students- Peer, faculty, and course evaluations with smaller groups (i.e., Doctoring groups and LEADS tracks)
- End of Year 1 and End of Year 2 overall experience evaluations
- Annual Learning Environment Surveys

If there are errors or concerns about MedHub, please submit a MedHub Support ticket via: https://www.bumc.bu.edu/bumc-emc/medhub-general-support/

Completion Expectations:

The Medical Education Office monitors compliance rates multiple times a year and formally notifies students of their compliance rate twice a year. Students who have completed less than 80% of their assigned evaluations at the half year will receive a notification email from the Associate Dean of Medical Education. If the compliance rate is less than 80% at mid or end of year, students will be discussed at a Student Early Intervention Committee meeting and may receive a professionalism warning letter if there are multiple concerns regarding lapses in professionalism.

Any student who received a warning letter at the end of year one and continues to have lapses in professionalism may be referred to the Student Evaluation & Promotions Committee.

This policy is also available on the school's webpage: https://www.bumc.bu.edu/camed/offices-services/md-program-offices/medical-education/policies/student-evaluation-of-courses-completion-policy/

Copyright Policy on the Use of Course Materials

The course's Blackboard site contains educational materials to be used only by students and faculty in conjunction with the course, or by non-course faculty and staff for other approved purposes. None of the posted materials are to be used or distributed without explicit

permission from the author of the materials, e.g., lecture notes, PowerPoint presentations, practice LPA or exam questions, case-based exercises, problem sets, etc.

Course materials are protected by copyright and may not be uploaded or copied to other sites for any purpose, regardless of whether the materials are made accessible publicly or on a private account. When content is uploaded to a site, the user is representing and warranting that they have rights to distribute the content, which requires explicit permission from the author of the materials.

Students who distribute materials without permission may be in violation of copyright laws, as well as required to go before the Medial Student Disciplinary Committee.

If you have any questions, contact the Course Director. For additional information:

- Intellectual Property Protection: https://www.bu.edu/academics/policies/intellectual-property-policy/

Chobanian & Avedisian School of Medicine Policies

Policies are located at: https://www.bumc.bu.edu/camed/education/medical-education/policies/

Learning Environment Expectations

Chobanian & Avedisian School of Medicine has a ZERO tolerance policy for medical student mistreatment. We expect students to be aware of the policy for appropriate treatment in medicine, including procedures for reporting mistreatment.

Learning more about the school's efforts to maintain and improve the learning environment at: https://www.bumc.bu.edu/camed/education/md/learning-environment/

Cultivating Attention to Foster Community

We believe that learning should take place in an environment that fosters collaboration and engagement, where students are encouraged to learn from the course content and from one another. We strive to intentionally design our classes to support sustained attention, where students can step away from the noise and distractions of the outside world and engage in meaningful, focused interaction. In any learning environment, sustained attention to others—through listening, dialogue, and presence—builds trust and empathy. Thus, attention is a foundational act of community-building, countering the isolating effects of digital distraction and helping individuals feel anchored in a collective purpose.

Our expectations with technology use are that they should support learning and connection, not fragment attention. Devices are expected to be used purposefully—such as for note-taking,

research, or collaboration—rather than for multitasking, shopping or entertainment during classroom sessions and shared activities. Students are encouraged to silence notifications and close unrelated apps to foster deeper engagement with your team and faculty. Students should use their peers as a resource for learning rather than digital tools.

We also expect our educators to model thoughtful technology use, demonstrating how digital tools can enhance rather than erode attention and community. We will be using digital and AI tools and will share how these tools are intended to complement learning, not supplement it. Please see the posted AI policy for more information on AI usage. Assignments in LEADS will be posted with guidance on the usage of AI tools which will vary by assignment.

Appropriate Treatment in Medicine (ATM)

Chobanian & Avedisian School of Medicine is committed to providing a work and educational environment that is conducive to teaching and learning, research, the practice of medicine and patient care. This includes a shared commitment among all members of the community to respect each person's worth and dignity, and to contribute to a positive learning environment where medical students are enabled and encouraged to excel.

Procedures for Reporting Mistreatment

Students who have experienced or witnessed mistreatment are encouraged to report it using one of the following methods:

- Contact the chair of the Appropriate Treatment in Medicine Committee (ATM), Dr. Vincent Smith, MD, directly by email (vincent.smith@bmc.org)
- Submit an online Incident Report Form through the online reporting system https://www.bumc.bu.edu/camed/student-affairs/md/student-resources/atm/

These reports are sent to the ATM chair directly. Complaints will be kept confidential and addressed quickly. Appropriate Treatment in Medicine website: https://www.bumc.bu.edu/camed/student-affairs/md/student-resources/atm/

Boston University Non-Discrimination Policy

https://www.bu.edu/policies/non-discrimination-policy/

Boston University Sexual Misconduct/Title IX Policy

The BU Sexual Misconduct/Title IX Policy is located at: http://www.bu.edu/safety/sexual-misconduct/title-ix- bu-policies/sexual-misconducttitle-ix-policy/

Boston University Social Media Guidelines

https://www.bu.edu/prsocial/